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## BIB DATA SHEET

CONFIRMATION NO. 6451

<b>SERIAL NUMBER</b> 10/551,303	<b>FILING or 371(c) DATE</b> 11/16/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 12695.0017USWO		
<b>APPLICANTS</b> Dawson James Reimer, Winnipeg, MB, CANADA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB04/00910 03/26/2004 which claims benefit of 60/457,907 03/27/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 04/09/2007						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/MEGHAN R FINN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MB	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 49	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> MERCHANT & GOULD PC P.O. BOX 2903 MINNEAPOLIS, MN 55402-0903 UNITED STATES						
<b>TITLE</b> Compositions For Treating Angina						
<b>FILING FEE RECEIVED</b> 1540	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			